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A	TELEP: FAX: (6	HONE: (617) 439-444 617) 439-4170 OR (6 is Constantinides	17) 439-7748	Much	

## Message:

To:

FAX NUMBER:

Dear Dr. Constantinides: Could you please sign and date and include your citizenship at page 3 of the enclosed

your citizenship at page 3 of the enclosed form and return the entire form to me by facsimile

**DIRECT NUMBER:** 

today. Thank you.

## Confidentiality Note

This facsimile contains privileged and confidential information intended only for the use of the individual or entity named above. If the reader of this facsimile is not the intended recipient or the employee or agent responsible for delivering it to the intended recipient, you are hereby notified that any dissemination or copying of this facsimile is strictly prohibited. If you have received this facsimile in error, please notify us immediately by telephone (call collect) and return the original facsimile to us at the above address via the U.S. Postal Service. We will reimburse you for postage. Thank you.

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Peter F. Corless

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> October 24, 2002 VIA FACSIMILE ONLY

## URGENT

Dr. Chris Constantinides

Re: Patent application entitled: Magnetic Resonance Imaging Methods and

Compositions"

Dear Dr. Constantinides:

I trust all is well with you. I have been trying to reach you for some time. As you probably recall, I am a patent attorney, and we worked on a patent application earlier this year.

Enclosed is a Declaration form which is required to be submitted to the U.S. Patent Office for your application.

Could you as the sole inventor on the application sign and date the document on page 3 where indicated. Please also print your citizenship on page 3 where indicated.

Please return the entire signed document (all 3 pages) to me today, October 24, to facsimile number 617 439 4170.

I will be out of town after today, and I would like to proceed to submit the signed form to the Patent Office later today.

Please contact me if you have any questions, or if I can be of any other assistance.

Best regards,

Peter F Corless

PFC:smd Enclosure

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